

167476

Sauget Site Field Office

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Fax

Bruce Yare
Mike Light
Mike McAtteer
To: Tim Garger From: Kimberly Perry
Fax: _____ Pages: 3
Phone: _____ Date: 4/10/00
Re: Sauget Area 1 CC: _____
☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Preparatory Inspection Meeting and Deviation
Log for slug tests.
Call with questions.

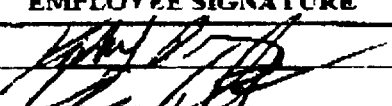
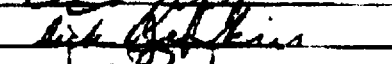
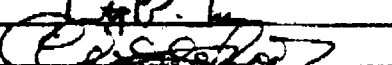
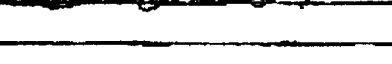
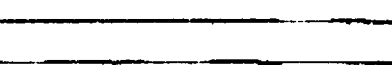
PREPARATORY INSPECTION MEETING

Conducted by/Company: DE Havardink / O'Brien + Gove Date: 10 Apr 00
 Project Name: Solutia - Saugeat Area 1 Task: Slug tests
 (See also prep. insp. mtg of 06 Dec 99)

1. Scheduled Work: see below
2. Equipment, Procedures, Personnel: " "
3. Ref. To App. Sec. of FSP/HASP: FSP # 5.14 ; HASP # 2.5
4. Issues that could arise and how to resolve: see below
5. Solutia comments: " "
6. EPA comments: " "

- ① Slug tests on installed slug test piezometers adjacent to sites G, H, I, L, N and on leachate wells on sites G & I
- ② Equip: slugs, pressure transducer, data logger, PPE, monitoring equip.
 Procedures: (see FSP # 5.14.3) in general, use pressure transducer + data logger to measure + record water levels over time, insert slug to initiate falling head test, ~~measure~~ (add water to initiate ~~falling~~ tests in shallow piezometers if there is insufficient water), remove slug to initiate rising head test, measure + record recovery of water level until 95% recovery to static conditions, evaluate data in field to assess if test was successful, ~~avg the results of rising~~ falling tests
- ③ see above
- ④ test not successful ⇒ reevaluate design of test + reperform
- ⑤ none
- ⑥ none

ATTENDANCE:

EMPLOYEE NAME (print)	EMPLOYEE SIGNATURE	COMPANY
Kember Penny		Solutia
Ben LAFFERTY		MAVERICK
Mark Jenkins		ORIG
Tim Tedesco		ORIG
CHRISTOPHER Rook		ORIG

cc: K. Penny 10 Apr 00
 USEPA C1600

IF ADDITIONAL SPACE IS REQUIRED,
 RECORD ON REVERSE SIDE

DE Havardink / DE Havardink
 PRINTED NAME/ SIGNATURE OF PREPARER

10 Apr 00
 DATE

DEVIATION LOG

INDIVIDUAL REQUESTING DEVIATION / COMPANY: _____

DATE 10 APR 00DE Haversink / O'Brien & GereHEALTH & SAFETY APPROVAL REQUIRED: YES _____ NO: XPROJECT NAME Solutia - Saugat Area 1PROJECT LOCATION Shallow slug test piezometers

WEATHER _____ PRECIPITATION _____ TEMPERATURE _____

NUMBER OF HOURS WORKED _____ NUMBER OF EMPLOYEES _____

1. CONTRACT ITEM BEING WORKED ON: _____
2. ITEM BEING DEVIATED (REF. APPROP. SEC. OF FSP/HASP): _____
3. REASON FOR DEVIATION: _____
4. DEVIATION OR FIELD CHANGE TO BE IMPLEMENTED: _____
5. EQUIPMENT: _____
6. DEVELOPMENTS WHICH MIGHT LEAD TO ISSUANCES OF A CHANGE ORDER OR BE THE BASIS OF A CLAIM (EQUIPMENT, TIME, MANPOWER, ETC.): _____
7. REMARKS: _____

- (1) Slug tests in shallow slug test piezometers
- (2) FSP # 5.14.3
- (3) Shallow slug test piezometers do not have water in them due to a drop in the water table since installation; Solutia instruction
- (4) Water will be introduced into the shallow piezometers which do not have sufficient water and a falling head "slug test" will be performed. In the event that sufficient water remains in a piezometer after water has been introduced, a rising head slug test will be attempted
- (5) New 55-gal drum, pump or bucket, water supply, pressure transducer, data logger, support vehicle
- (6) Additional costs will be incurred if the test cannot be adequately performed with the equipment and procedures planned.
- (7) The planned water source is the pipe/faucet at the field office.

cc: K. Perry 10 APR 00
USEPA @ 1540

DE Haversink / DE Schwaner
PRINTED NAME / SIGNATURE OF PREPARER

10 APR 00

DATE

IF ADDITIONAL SPACE IS REQUIRED,

Kimberly Perry / [Signature] 4/10/00
PRINTED NAME / SIGNATURE OF SOLUTIA REP / DATE

PRINTED NAME / SIGNATURE OF USEPA REP / DATE